

Page 1 of 22

August 01, 2008

1 Petitioner, Joshua Woolridge P-33283  
2 California Correctional Center  
3 Post Office Box 2210  
4 Susanville California 96127-2210  
5 Petitioner, Filing In Pro Per

FILED

00 AUG -6 PM 12:34

CLERK, U.S. DISTRICT COURT,  
NORTHERN DISTRICT OF CALIFORNIA

6  
7 United States Federal District Court  
8 For The Northern Division  
9 San Francisco Court House  
10  
11

12  
13 Joshua Todd Woolridge,  
14 Petitioner,

V.

15  
16 California Department of  
17 Corrections and Rehabilitations,  
18 Respondent,

Civil Court Case Number  
CV-08-3304 (SBA)

Notice of Motion to hereby  
legally undo the Court of  
the acts of Sheer Malice  
by (CDCR) by vindictively out  
of Retaliation raising petitioners  
custody level to endanger the  
petitioners life in error.

19  
20 To the Honorable Federal District Court,  
21 Senior District Judge Thelton E. Henderson,  
22 presiding this Civil Matter and the current  
23 overcrowding and Medical Neglect in the California  
24 State Prison System. Since legally and lawfully  
25 filing this Civil Complaint and legally serving  
26 the Warden Kathleen Prosper, here at the  
27



1 California Correctional Center a copy of this  
2 Civil Action petitioner has been treated with  
3 disrespect, Deliberate Indifference, and out of  
4 sheer Malice been targeted by the (CDCR)  
5 Departmental Staff. Petitioner has unlawfully  
6 and Vindictively been served and found guilty  
7 of a falsified (CDC-115 RVR) Rules Violation  
8 Report for the incident on May 30, 2008, where  
9 petitioner was factually the victim of a assault  
10 and Robbery of his personal property in error.  
11 Since filing Civil Action petitioner is now being  
12 listed as the aggressor/perpetrator in the  
13 May 30, 2008, in error. Petitioner's Classification  
14 Score and Custody level has been vindictive  
15 raised from level II Custody to a level III  
16 Custody level in error without justification or  
17 Cause. Petitioner, has Corroborated facts and  
18 twenty-Four eye witnesses to truthfully  
19 testify that petitioner was physically Assaulted  
20 and Robbed on May 30, 2008. The CSR Action  
21 dated July 23, 2008, has Maliciously endorsed  
22 petitioner to a level III facility, Not awaiting  
23 the completion of the ongoing Independent  
24 Investigation and/or the meritorious Inmate  
25  
26  
27



1 602 Appeal issue "Disciplinary" Log Number  
2 CCC-L-08-00917, with a due date of  
3 September 03, 2008, currently pending. By  
4 (CDCR) vindictively raising petitioner's Custody  
5 level and Classification unlawfully endangers  
6 petitioner's life. Petitioner, seeking a legal  
7 "Injunctive Relief" order and ruling due to  
8 these exceptional circumstances which will legally  
9 and unlawfully prejudice petitioner causing  
10 serious Constitutional Violation and maybe loss of  
11 life. Petitioner, is seeking the courts judicial  
12 usurpation of power regarding this unjust and  
13 unlawful transfer to a higher Custody level. The  
14 current acts and proceedings by (CDCR) do not  
15 justify petitioner higher Custody placement without  
16 the Preponderance of all Evidence and case  
17 facts evaluated. A impartial, fair, and legal  
18 ruling is warranted due to Constitutional Violations  
19 not being upheld.

20  
21  
22  
23  
24 Petitioner, Joshua Woolridge legally and lawfully state  
25 these facts to be true and correct under the Penalty  
26 of Perjury to the best of my knowledge!

27  
Respectfully Submitted,  
Joshua Woolridge  
Petitioner, In Pro Per



I, the undersigned, hereby declare and state that, I am over the age of eighteen (18) years old and I <sup>the</sup> ~~(am)~~ <sup>petitioner</sup> a party to the within cause of action that on this 01<sup>st</sup> day of August, 2008, I placed the below named legal documents in the United States Mail:

Notice of Motion to legally  
undate the Court of (COC)  
vindictively retaliation by raising  
Custody Points and Custody level to  
unlawfully endanger petitioner's life.

for which are addressed to the below named parties/persons:

original served

1. United States District Court  
 Northern District of California  
 Clerk, U.S. District Court  
 ATTN: Clerk of the Court For Filing  
 450 Golden Gate Avenue  
 San Francisco, California  
 94102-9670
- 3.

copy served

2. California Correctional Center  
 711-045 Center Road  
 Warden, Kathleen Prosper  
 Post Office Box 790  
 Susanville, California  
 96130
- 4.

I, hereby declare under the penalty of perjury of the laws of the State California, and the United States, that the above certificate of service true and correct to the best of my knowledge and recollection.

Joshua W. Woodbridge  
 DECLARANT

Facts Inconsistence with Actual Evidence

Page 1 of 2

True fact, on May 30, 2008, in Dorm 5316 Low on the Sierra Facility I was Verbally, physically Assaulted, Battered, and physically Robbed for my personal property by inmate

\* Aaron SNell F-83170, A.K.A. "Ed Loc" of 69<sup>th</sup> Blvd. Manila "Crip" from Long Beach. I, the victim Joshua Woolridge did physically sustain a Broken Left Index Finger, and a fractured Left Rib and loss of my personal property valued at approximately \$100.00 dollars due to inmate Aaron SNell violent act. On June 11, 2008, after a interview with the Assigned Investigative Employee Correctional Officer T. Williams, Verbally told me that your personal property cannot be located and is a total loss on that issue. On June 11, 2008, I Joshua Woolridge the actual Victim did legally file a Inmate 602 Appeal Form Log NO. 060908-100, against the Sierra (U.C.) Classification Committee Captain E.F. Mussen, Lieutenant R.P. Roman, Correctional Counselor II A. Fiegner, and Correctional Counselor I, D. Hurk for Negligently and "Reckless Disregard" housing me Joshua Woolridge in a "Crip Dorm" since I am not a gang member in error, and the Committee's actions was sheer Negligence and should be held liable for my personal property which is stolen. I, Joshua Woolridge did file a Government Tort Claim against these (CDCR) employees for my Personal Injuries sustained and loss of Personal Property due to I inmate Woolridge had requested on numerous occasions a immediate transfer due to my Safety and security Concerns. On June 13, 2008, Correctional Officer's T. Williams, fabricated and falsified illegally



concluded that Now I inmate Woolridge was the perpetrator and Not the victim out of Sheer Malice and retaliation. On Monday June 16, 2008, Correctional Lieutenant R.P. Roman, one of the Named Defendants in the Inmate 602 Appeal and the Government Tort Claim, vindictively out of a sheer act of Retaliation and Reprisal Write's me Joshua Woolridge a CDE-115 RVR for alleged "Battery on a Inmate" inmate Swell due to this Correctional Lieutenant's Reckless Disregard for the truth in this incident. Why am I inmate Woolridge the actual victim being willfully treated with "Deliberate Indifference" by several staff members here at the California Correctional Center and Vindictively being charged with this unjustifiable offense when I am actually the victim in this incident. I, am seeking a Full Complete investigation into this incident and to have all Disciplinary actions Dismissed as they are inconstance with the Truth and to have my CSR Endorsement honored and a immediate transfer to a Correctional Facility in Southern California per the Family Law Judge's court order to obtain "Visitation with my children". A immediate transfer is humbly warranted in the best interest of all parties! I, inmate Woolridge physically sustained Serious injuries as defined in the Title 15CCR 3000, a broken left Ring finger, as well as other minor injuries due to this assault and Robbery.

DIVISION OF ADULT INSTITUTIONS  
CLASSIFICATION SERVICES UNIT  
P. O. BOX 942883  
SACRAMENTO, CA 94283-0001



July 11, 2008

Joshua Woolridge  
P-33283/L4-136L  
California Correctional Center  
P.O. Box 2210  
Susanville, CA 96127-2210

Dear Mr. Woolridge:

Your recent letter to the Classification Services Unit has been referred to me for response. You state that you were endorsed for transfer to the California Rehabilitation Center (CRC) by a Classification Staff Representative (CSR). Although you had the transfer date of June 11, 2008, it was cancelled by Lieutenant R. D. Ramon without justification. You believe Lieutenant Ramon acted out of "sheer malice and blatant retaliation." You also state that you received a Rules Violation Report (RVR) on June 17, 2008, for Battery on an Inmate, which is a false allegation. You are requesting these matters are investigated and an immediate transfer to CRC. \*

Please be assured that we are sensitive to your concerns; however, due to the nature of your request, this matter must be addressed at the institution level. You are reminded that all transfer related issues are addressed through an inmate's assigned counselor. Contact was made with K. Battey, Assistant Classification and Parole Representative (C&PR), at California Correctional Center (CCC), regarding these matters. \* Information provided by Ms. Battey indicates that your scheduled transfer to CRC, a level II institution, was initially postponed based on a medical hold. According to Ms. Battey, your medical hold had been lifted on July 9, 2008. However, on June 17, 2008, you were charged with Battery on an Inmate; an offense subject to a Security Housing Unit (SHU) term. It is the Department's general policy that no inmate is transferred with pending RVR. Currently, the RVR has been adjudicated and you were found guilty of the offense. As a result, your classification score has been increased to 35 (level III points). Therefore, the previous endorsement to CRC is no longer valid. On July 10, 2008, the Institution Classification Committee (ICC) assessed a three month SHU term, with a Minimum Eligible Release Date (MERD) of August 8, 2008, and referred the case back to CSR for transfer consideration to an appropriate level III institution. The ICC recommended Correctional Training Facility (CTF) with an alternate of Pleasant Valley State Prison (PVSP) for transfer upon expiration of MERD.

In your letter, you complained about staff misconduct regarding your transfer and handling the RVR without substance. A review of the above information indicates staff at CCC followed the departmental policy. Furthermore, you stated in your letter that these matters are pending review by the inmate appeal system and "Government Tort Claim." It is inappropriate to further comment on these issues while waiting for outcome of these reviews.

Woolridge, P-33283  
Page 2

I hope this information is of assistance. If you have any other questions or concerns, you are asked to contact your assigned counselor at the institution.

Sincerely,

A handwritten signature in dark ink, appearing to be 'B. Lee', with a long horizontal flourish extending to the right.

B. Lee  
Classification Staff Representative  
Classification Services Unit

cc: C. Gutierrez, C&PR, CCC  
CDCR-08-2860



No. P-33283


NAME: WOOLREDGE, J.

44-1362

**Comment:** PVSP-III endorsed upon expiration of MERD. CS = 35.

There are no MHSDS needs per CDC 128-C dated 6-1-08. Inmate is NCF per CDC 128-C2 of 6-28-03. R suffix is noted. Violent history noted (VIO). TB Code is 22. CDC 812 is noted. Confidential file is noted. 3 month SHU term for RVR of 6-16-08 for Battery on Inmate approved as assessed by ICC action of 7-10-08 with MERD of 8-8-08.

**Retain (in ASU) as MERD is too short to allow for transfer to a SHU unit. This transfer approval expires 10/18/2008 and will require return to CSR for re-authorization.**

  
B. Alkire, CSR

Date: 7/23/2008

Classification - CSR ACTION

CCC

---

CDC RECLASSIFICATION SCORE SHEET

4. DATE OF LAST SCORE SHEET  
MO DAY YR  
5 21 08 18

5. FORM IDENTIFICATION (ENTER X in a, b or c)  
a) NEW ☒ 24 b) CORRECTION ☐ 25 c) DELETE ☐ 26

B. ANNUAL/ 6 MONTH REVIEW PERIOD DATES  
1. REVIEW PERIOD BEGINNING DATE  
MO DAY YR  
1 2 24 07 33  
3. (Enter X) Annual ☒ 39  
2. REVIEW PERIOD ENDING DATE  
MO DAY YR  
6 23 08 40  
4. Number of Full Review Periods  
1

C. FAVORABLE BEHAVIOR SINCE LAST REVIEW  
1. Continuous Minimum Custody ☒ x 4 = 46  
2. No Serious Disciplinary ☒ x 2 = 48  
3. Average or Above Performance in Work, School or Vocational Program ☒ x 2 = 50  
4. TOTAL FAVORABLE POINTS = 144

D. UNFAVORABLE BEHAVIOR SINCE LAST REVIEW  
SERIOUS DISCIPLINARIES  
1. Div. A-1/A-2  
Dates: 6-16-08  
1 x 8 = 8 52  
Div. B, C & D  
Dates: 6-16-08  
1 x 6 = 6 54  
Div. E & F  
Dates: 6-16-08  
1 x 4 = 4 56  
2. Battery or Attempted Battery on a Non-Prisoner  
Dates: 6-16-08  
1 x 8 = 8 58  
3. Battery or Attempted Battery on an Inmate  
Dates: 6-16-08  
1 x 4 = 4 60  
4. Distribution of Drugs  
Dates: 6-16-08  
1 x 4 = 4 62  
5. Possession of a Deadly Weapon  
Dates: 6-16-08  
1 x 16 = 16 64  
6. Inciting a Disturbance  
Dates: 6-16-08  
1 x 4 = 4 66  
7. Battery Causing Serious Injury  
Dates: 6-16-08  
1 x 16 = 16 68  
8. TOTAL UNFAVORABLE POINTS = 10

E. CORRECTION TO CDC 840 SCORE SHEET (Prior to Rev. 07/02)  
1. Use this section to correct a CDC 840 score sheet with a form revision date prior to 07/02.  
TOTAL CORRECTION = (+ OR -) 70  
F. COMPUTATION OF SCORE  
1. PRIOR PRELIMINARY SCORE (Preliminary Score from 839/New Preliminary Score from 840 or 841) = 25 73  
2. Net Change in Score (D. 8 minus C. 4) = (+ or -) + 10 76  
3. PRELIMINARY SCORE SUBTOTAL (Not less than 0) = 35  
4. Change in Term Points (T/P) (x 2) - Old T/P + New T/P = (+ or -) 79  
5. NEW PRELIMINARY SCORE (Not less than 0) = 35 82  
G. PLACEMENT  
MANDATORY MINIMUM SCORE FACTOR CODES AND SCORES  
CODE SCORE CODE SCORE  
[A] Condemned 52 [E] Warrants "R" Suffix 19  
[B] Life Without Possibility of Parole 52 [F] Violence Exclusion 19  
[C] CCR 3375.2(a)(7) Life Inmate 28 [G] Public Interest Case 19  
[D] History of Escape 19 [H] Other Life Sentence 19  
1. SCORE FACTOR CODE (Assess Only Highest Factor) E 85  
2. MANDATORY MINIMUM SCORE 19 86  
3. PLACEMENT SCORE  
ENTER NEW PRELIMINARY SCORE OR MANDATORY MINIMUM SCORE WHICHEVER IS GREATER 35 88  
H. SPECIAL CASE FACTORS  
1. HOLDS, WANTS and DETAINERS (Enter A, P or \*)  
Felony ☐ 91 USINS ☐ 92  
2. RESTRICTED CUSTODY SUFFIX (Enter R or \*) R 93  
3. ELIGIBLE FOR RESTITUTION CENTER (Enter Y or N) ☐ 94  
4. LEVEL IV DESIGN a) 180 Status (Y/N) ☐ b) Reason Code ☐  
5. US ARMED FORCES (Enter Y or N) ☐ 95  
6. CURRENT INSTITUTION AND FACILITY CCC III 96  
7. COUNTY OF LAST LEGAL RESIDENCE ☐ ☐ ☐ 103  
8. CASEWORKER'S NAME FI  
WAYBRIGHT J 106

I. CLASSIFICATION STAFF REPRESENTATIVE  
1. LAST NAME ALKIRE 115  
2. DATE OF ACTION 7-23-08 123  
3. LEVEL IV DESIGN a) 180 Status (Enter Y or \*) ☐ 129 b) Reason Code ☐ 130  
4. MINIMUM CUSTODY a) Eligibility (Enter E, L or P) P 132 b) Reason Code VIO 133  
5. CCRC ELIGIBILITY (Enter REN, REX or \*) ☐ 136  
6. DEVELOPMENTAL DISABILITY PROGRAM (DDP) CODE NCF 139  
7. DISABILITY PLACEMENT PROGRAM (DPP) CODE(S) a) (\*) Primary (affects placement) ☐ ☐ ☐ ☐ 142 b) (\*) ☐ ☐ ☐ ☐ 146 c) (\*) ☐ ☐ ☐ ☐ 150 d) (\*) ☐ ☐ ☐ ☐ 154  
8. ADMINISTRATIVE DETERMINANT CODE(S) a) (\*) ☐ SEX 158 b) (\*) ☐ ☐ ☐ ☐ 162 c) (\*) ☐ ☐ ☐ ☐ 166 d) (\*) ☐ ☐ ☐ ☐ 170 e) (\*) ☐ ☐ ☐ ☐ 174  
9. MENTAL HEALTH LEVEL OF CARE (Enter C or E) CCCMS EOP ☐ 178  
10. INSTITUTION APPROVED PVSPI 179  
11. REASON FOR ADMINISTRATIVE OR IRREGULAR PLACEMENT ☐ ☐ ☐ 186

A. IDENTIFYING INFORMATION  
1. CDC NUMBER P 33283 1  
2. INMATE'S LAST NAME WOOLRIDGE 7  
3. DATE COMPLETED 7-10-08 12  
MO DAY YR

# CRIME / INCIDENT REPORT

## PART C - STAFF REPORT

CDCR 837-C (REV. 10/06)

Page 1 of 1

INCIDENT LOG NUMBER

CCC-SIER-08-05-0099

NAME: LAST

\* HOWE

FIRST

[REDACTED]

MI

INCIDENT DAT

5/30/08

INCIDENT TIME

12:10

POST #

241220

POSITION

D-Lower Tier %

YEARS OF SERVICE

[REDACTED] YR.

MO.

DATE OF REPORT

5/30/08

LOCATION OF INCIDENT

Sierra Dorm 53

RDO's

S/M

DUTY HOURS

0600 - 1400

DESCRIPTION OF CRIME / INCIDENT

Battery on an Inmate Resulting in Serious Bodily Injury

CCR SECTION / RULE

3005-c1 Force or Violence

YOUR ROLE

PRIMARY

RESPONDER

WITNESS

VICTIM

CAMERA

SCRIBE

WITNESSES (PREFACE S-STAFF, V-VISITOR, O-OTHER)

S- Sgt. Duval

INMATES (PREFACE S-SUSPECT, V-VICTIM, W-WITNESSES)

\* V-Woolridge P-33283

FORCE USED BY YOU

WEAPON

PHYSICAL

CHEMICAL

NONE

FORCE USED BY YOU - TYPE OF WEAPON / SHOTS FIRED / FORCE

N/A

WEAPON

MINI 14

WARNING

EFFECT:

LAUNCHER:

37MM

EFFECT#:

CHEMICAL/ TYPE:

N/A

FORCE:

EXPANDABLE BATON

.38 CAL

PHYSICAL FORCE

9MM

SHOTGUN

40MM

40 MM MULTI

HFWRS

CN

CS

OTHER

FORCE OBSERVED BY YOU

WEAPON

PHYSICAL

CHEMICAL

NONE

EVIDENCE DESCRIPTION

X N/A

EVIDENCE DISPOSITION

X N/A

BIO HAZARD

Yes

X No

PPE

Yes

X No

EVIDENCE COLLECTED BY

Yes

No

DESCRIPTION OF INJURY

X N/A

LOCATION TREATED (HOSPITAL / CLINIC)

X N/A

FLUID EXPOSURE

BODILY

UNKNOWN

OTHER

SCIF 3301/3067 COMPLETED

Yes

X No

REPORTING STAFF INJURED

Yes

No

NARRATIVE:

On 5-30-08 at approx. 1210 hrs. While performing the duties of post 241220, Sierra Yard D-Lower Tier Officer. After receiving I/m Woolridge P-33283, housed in 5D5103<sup>L</sup> and placing him in his new housing from bed SE 5316<sup>L</sup> during a institutional bed move on Sierra Yard. I/m Woolridge approached me at the back bathroom door of dorm 51 and stated that he had cut his finger and would like to go to the clinic to have it looked at. I asked Woolridge approx. Three times how he cut his finger. Woolridge would not answer. I called over the institutional radio to Sierra Unit Sgt. Duval that I was sending Woolridge over to the Sierra Unit office to see him due to Woolridge having a cut finger and refusing to explain how he cut his finger.

CHECK IF NARRATIVE IS CONTINUED ON PART C1

SIGNATURE OF REPORTING STAFF

TITLE

%

BADGE #

34190

ID#

[REDACTED]

DATE

5/30/08

NAME AND TITLE OF REVIEWER (PRINT/ SIGNATURE)

DATE RECEIVED

APPROVED

Yes

No

CLARIFICATION NEEDED

Yes

No

DATE

5/31/08J.L. BERNARD[Signature]5/31/08

CDCR 837-C (REV. 10/06)

CCC-SIER-08-05-0099

NAME: LAST <b>DUVAL</b>		FIRST [REDACTED]		MI <b>S</b>	INCIDENT DATE <b>5/30/2008</b>	INCIDENT TIME <b>12:10</b>
POST # <b>240327</b>	POSITION <b>SIERRA SERGEANT</b>	YEARS OF SERVICE <b>YR. MO.</b>	DATE OF REPORT <b>5/30/2008</b>		LOCATION OF INCIDENT <b>SIERRA DORM 53</b>	
RDO's <b>M/T</b>	DUTY HOURS <b>06:00-14:00</b>	DESCRIPTION OF CRIME / INCIDENT <b>Battery on an Inmate Resulting in Serious Bodily Injury</b>				CCR SECTION / RULE <b>3005-c1 Force or Violence</b>
YOUR ROLE		WITNESSES (PREFACE S-STAFF, V-VISITOR, O-OTHER)		INMATES (PREFACE S-SUSPECT, V-VICTIM, W-WITNESSES)		
RESPONDER		S- C/O J. HOWE S- C/O J. TEMPLETON		S-C/O T. WILLIAMS * V-WOOLRIDGE P-33283		S-SNELL F83170
FORCE OBSERVED BY YOU	FORCE USED BY YOU - TYPE OF WEAPON / SHOTS FIRED / FORCE				CHEMICAL AGENTS USED	
NONE	<input checked="" type="checkbox"/> N/A <b>FORCE:</b> <input type="checkbox"/> EXPANDABLE BATON <input type="checkbox"/> PHYSICAL FORCE <input type="checkbox"/> X10				<b>WEAPON</b> <input type="checkbox"/> MINI 14 <input type="checkbox"/> .38 CAL <input type="checkbox"/> 9MM <input type="checkbox"/> SHOTGUN <b>WARNING</b> <b>EFFECT:</b> <b>LAUNCHER:</b> <input type="checkbox"/> 37MM <input type="checkbox"/> L8 <input type="checkbox"/> 40MM <input type="checkbox"/> 40 MM MULTI <input type="checkbox"/> HFWS <b>EFFECT#:</b> <b>CHEMICAL/ TYPE:</b> <input type="checkbox"/> OC <input type="checkbox"/> CN <input type="checkbox"/> CS <input type="checkbox"/> OTHER	
EVIDENCE COLLECTED BY	EVIDENCE DESCRIPTION		EVIDENCE DISPOSITION		BIO HAZARD	PPE
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> N/A		<input checked="" type="checkbox"/> N/A		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
REPORTING STAFF INJURED	DESCRIPTION OF INJURY		LOCATION TREATED (HOSPITAL / CLINIC)	FLUID EXPOSURE		SCIF 3301/3067 COMPLETED
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> N/A		<input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> N/A DESC:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## NARRATIVE:

On Friday, May 30, 2008 at approximately 1210 hours, I heard Sierra D Lower, Officer Howe, announce over the institutional radio that he observed an inmate (Woolridge) with a cut on his finger and had sent him to the Sierra Unit Office. Officer Howe informed me that Woolridge was the inmate that had just received a bed move to dorm 51 and was already enroute, walking by the main kitchen. (Inmate Woolridge had been issued a bed move from dorm SE 5316L to SD 5103L.) I called Sierra E Upper, Officer Williams, via the institutional radio to contact me. I approached inmate Woolridge on Sierra yard on the track near the main kitchen. I escorted Woolridge to the Sierra Unit Office. Officer Williams was present when I interviewed Woolridge in the office. I asked Woolridge about his finger. Woolridge showed me his left ring finger. The finger appeared to have a cut and was swollen. Officer Williams conducted an unclothed body search of inmate Woolridge. I instructed Officer Williams to escort Woolridge to be medically cleared. Officer Williams escorted Williams from the office. Upon a subsequent unclothed body search of inmates assigned to dorm 53, Officer Williams conducted an unclothed body search of inmate Snell in the Sierra unit Office. I observed Snell to have marks consistent with being involved in a physical altercation. I instructed Officer Templeton to escort inmate Snell to Receiving and Release to be medically cleared pending transfer to Administrative Segregation. Officer Templeton escorted Snell from the Sierra Unit office.

☐ CHECK IF NARRATIVE IS CONTINUED ON PART C1

SIGNATURE OF REPORTING STAFF <i>[Signature]</i>	TITLE Correctional Sergeant	BADGE # 59590	ID # [REDACTED]	DATE 5/30/2008
NAME AND TITLE OF REVIEWER (PRINT/ SIGNATURE) <i>Sgt. C. HARRIS</i>	DATE RECEIVED 5/30/08	APPROVED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	CLARIFICATION NEEDED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	DATE 5/30/08

CRIME / INCIDENT REPORT  
PART C - STAFF REPORT

Case 4:08-cv-03304-SBA Document 5 Filed 08/06/2008 Page 13 of 22

INCIDENT LOG NUMBER

CDCR 837-C (REV. 10/06)

CCC-SIER-08-05-0099

NAME: LAST DUVAL		FIRST [REDACTED]		MI S	INCIDENT DATE 5/30/2008	INCIDENT TIME 12:10
POST # 240327	POSITION SIERRA SERGEANT	YEARS OF SERVICE [REDACTED] YR.	MO. [REDACTED]	DATE OF REPORT 5/30/2008	LOCATION OF INCIDENT SIERRA DORM 53	
RDO's M/T	DUTY HOURS 06:00-14:00	DESCRIPTION OF CRIME / INCIDENT Battery on an Inmate Resulting in Serious Bodily Injury				CCR SECTION / RULE 3005-c1 Force or Violence
YOUR ROLE RESPONDER		WITNESSES (PREFACE S-STAFF, V-VISITOR, O-OTHER) S- C/O J. HOWE S- C/O J. TEMPLETON		INMATES (PREFACE S-SUSPECT, V-VICTIM, W-WITNESSES) V-WOOLRIDGE P-33283 S-SNELL F83170		
FORCE OBSERVED BY YOU NONE		FORCE USED BY YOU - TYPE OF WEAPON / SHOTS FIRED / FORCE <input checked="" type="checkbox"/> N/A <b>FORCE:</b> <input type="checkbox"/> EXPANDABLE BATON <input type="checkbox"/> PHYSICAL FORCE <input type="checkbox"/> X10 <b>WEAPON</b> <input type="checkbox"/> MINI 14 <input type="checkbox"/> .38 CAL <input type="checkbox"/> 9MM <input type="checkbox"/> SHOTGUN <b>WARNING</b> <b>EFFECT:</b> <b>LAUNCHER:</b> <input type="checkbox"/> 37MM <input type="checkbox"/> L8 <input type="checkbox"/> 40MM <input type="checkbox"/> 40 MM MULTI <input type="checkbox"/> HFWRS <b>EFFECT#:</b> <b>CHEMICAL/ TYPE:</b> <input type="checkbox"/> OC <input type="checkbox"/> CN <input type="checkbox"/> CS <input type="checkbox"/> OTHER				
EVIDENCE COLLECTED BY <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		EVIDENCE DESCRIPTION <input checked="" type="checkbox"/> N/A		EVIDENCE DISPOSITION <input checked="" type="checkbox"/> N/A		BIO HAZARD <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
REPORTING STAFF INJURED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		DESCRIPTION OF INJURY <input checked="" type="checkbox"/> N/A		LOCATION TREATED (HOSPITAL / CLINIC) <input checked="" type="checkbox"/> N/A		FLUID EXPOSURE <input checked="" type="checkbox"/> N/A DESC: SCIF 3301/3067 COMPLETED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

NARRATIVE:

On Friday, May 30, 2008 at approximately 1210 hours, I heard Sierra D Lower, Officer Howe, announce over the institutional radio that he observed an inmate (Woolridge) with a cut on his finger and had sent him to the Sierra Unit Office. Officer Howe informed me that Woolridge was the inmate that had just received a bed move to dorm 51 and was already enroute, walking by the main kitchen. (Inmate Woolridge had been issued a bed move from dorm SE 5316L to SD 5103L.) I called Sierra E Upper, Officer Williams, via the institutional radio to contact me. I approached inmate Woolridge on Sierra yard on the track near the main kitchen. I escorted Woolridge to the Sierra Unit Office. Officer Williams was present when I interviewed Woolridge in the office. I asked Woolridge about his finger. Woolridge showed me his left ring finger. The finger appeared to have a cut and was swollen. Officer Williams conducted an unclothed body search of inmate Woolridge. I instructed Officer Williams to escort Woolridge to be medically cleared. Officer Williams escorted Williams from the office. Upon a subsequent unclothed body search of inmates assigned to dorm 53, Officer Williams conducted an unclothed body search of inmate Snell in the Sierra unit Office. I observed Snell to have marks consistent with being involved in a physical altercation. I instructed Officer Templeton to escort inmate Snell to Receiving and Release to be medically cleared pending transfer to Administrative Segregation. Officer Templeton escorted Snell from the Sierra Unit office.

☐ CHECK IF NARRATIVE IS CONTINUED ON PART C1

SIGNATURE OF REPORTING STAFF [Signature]	TITLE Correctional Sergeant	BADGE # 59590	ID# [REDACTED]	DATE 5/30/2008
NAME AND TITLE OF REVIEWER (PRINT/ SIGNATURE) Sgt. C. HATHW	DATE RECEIVED 5/30/08	APPROVED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	CLARIFICATION NEEDED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	DATE 5/30/08



STATE OF CALIFORNIA

DEPARTMENT OF CORRECTIONS AND REHABILITATION

## CRIME / INCIDENT REPORT

## PART C - STAFF REPORT

CDCR 837-C (REV. 10/06)

Page 1 of 1

INCIDENT LOG NUMBER

CCC-SIER-08-05-0099

NAME: LAST <u>Williams</u>		FIRST <u>[REDACTED]</u>		MI	INCIDENT DAT <u>5-30-08</u>	INCIDENT TIME <u>1210</u>
POST # <u>241223</u>	POSITION <u>E-upper</u>	YEARS OF SERVICE <u>22</u> YR.	MO.	DATE OF REPORT <u>5-30-08</u>	LOCATION OF INCIDENT <u>Dorm 53 Sierra</u>	
RDO's <u>S/S</u>	DUTY HOURS <u>6-14</u>	DESCRIPTION OF CRIME / INCIDENT <u>Battery on an I/m w/serious bodily injury</u>			CCR SECTION / RULE <u>3005 (C)</u>	
YOUR ROLE		WITNESSES (PREFACE S-STAFF, V-VISITOR, O-OTHER)		INMATES (PREFACE S-SUSPECT, V-VICTIM, W-WITNESSES)		
<input checked="" type="checkbox"/> PRIMARY RESPONDER		<u>Sgt. A. Duvall S</u>		<u>Wadridge P33283 V</u>		
<input type="checkbox"/> WITNESS		<u>R.N. J. Low S</u>		<u>Snell F 83170</u>		
<input type="checkbox"/> VICTIM						
<input type="checkbox"/> CAMERA						
<input type="checkbox"/> SCRIBE						
FORCE USED BY YOU		FORCE USED BY YOU - TYPE OF WEAPON / SHOTS FIRED / FORCE				
<input checked="" type="checkbox"/> WEAPON		WEAPON: <u>MINI 14</u>				
<input type="checkbox"/> PHYSICAL		WARNING EFFECT: <u>37MM</u>				
<input type="checkbox"/> CHEMICAL		LAUNCHER: <u>L8</u>				
<input type="checkbox"/> NONE		EFFECT#: <u>40MM</u>				
		40 MM MULTI				
		HFWRS				
		CHEMICAL TYPE:				
		<input checked="" type="checkbox"/> N/A				
		<input type="checkbox"/> OC				
		<input type="checkbox"/> CN				
		<input type="checkbox"/> CS				
		<input type="checkbox"/> OTHER				
FORCE OBSERVED BY YOU		EVIDENCE DESCRIPTION		EVIDENCE DESCRIPTION		BIO HAZARD
<input checked="" type="checkbox"/> WEAPON		<input checked="" type="checkbox"/> N/A		<input checked="" type="checkbox"/> N/A		<input checked="" type="checkbox"/> Yes
<input type="checkbox"/> PHYSICAL						<input type="checkbox"/> No
<input type="checkbox"/> CHEMICAL						
<input type="checkbox"/> NONE						
EVIDENCE COLLECTED BY		DESCRIPTION OF INJURY		LOCATION TREATED (HOSPITAL / CLINIC)		SCIF 3301/3067 COMPLETED
<input checked="" type="checkbox"/> Yes		<input checked="" type="checkbox"/> N/A		<input checked="" type="checkbox"/> N/A		<input type="checkbox"/> Yes
<input type="checkbox"/> No						<input checked="" type="checkbox"/> No
REPORTING STAFF INJURED				FLUID EXPOSURE		
<input checked="" type="checkbox"/> Yes				<input checked="" type="checkbox"/> N/A		
<input type="checkbox"/> No				BODILY		
				UNKNOWN		
				OTHER		

## NARRATIVE:

On 5-30-08 at approx. 1210 hrs., I was summoned by The Sierra unit Sgt. (A. Duvall) to report to the Sierra unit office. When I reached the office I was informed that an inmate who had been moved to a Delta unit dorm (I/m Wadridge P33283) was observed to have an injured finger that could be indicative of fighting.

I directed I/m Wadridge to enter the Sierra Sgt's office and submit to an undressed body search. I/m Wadridge complained of pain to his left ring finger, left rib area and the back of his head. I escorted I/m Wadridge to the clinic where he was examined by R.N. J. Low who documented his injuries. A subsequent X-ray discovered the finger to be broken.

I then conducted an undressed body search of I/m Snell (F83170 S3-16U) and discovered him to have marks and abrasions consistent with fighting. Both inmates were medically cleared and placed into AD-Seg pending further investigation.

CHECK IF NARRATIVE IS CONTINUED ON PART C1

SIGNATURE OF REPORTING STAFF <u>[Signature]</u>	TITLE <u>40</u>	BADGE # <u>32396</u>	ID# <u>[REDACTED]</u>	DATE <u>5-30-08</u>
NAME AND TITLE OF REVIEWER (PRINT/ SIGNATURE)	DATE RECEIVED	APPROVED Yes No	CLARIFICATION NEEDED Yes No	DATE

Petitioner, Joshua Woolridge P-33283  
 California Correctional Center (CCC)  
 Post Office Box 2210  
 Susanville, California 96127-2210  
 Petitioner, Filing In Pro Per

E-filing

UNITED STATES DISTRICT COURT  
 NORTHERN DISTRICT OF CALIFORNIA

SBA

Joshua Todd Woolridge

Plaintiff,

vs.

California Department of  
 Corrections and Rehabilitation  
 Defendant.

CV 08

CASE NO. \_\_\_\_\_

3304

PRISONER'S  
 APPLICATION TO PROCEED  
 IN FORMA PAUPERIS

I, Joshua Woolridge, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes \_\_\_ No ☒

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: 0.00 Net: 0.00

Employer: Unemployed due to false  
incarcerated

1 If the answer is "no," state the date of last employment and the amount of the gross and net  
 2 salary and wages per month which you received. (If you are imprisoned, specify the last  
 3 place of employment prior to imprisonment.)

4 Last date of employment September 14,  
 5 2004, at the Gross amount of \$4,000.00  
 6 A month as owner of JT Landscaping & Hauling

7 2. Have you received, within the past twelve (12) months, any money from any of the  
 8 following sources:

9 a. Business, Profession or  
 10 self employment

Yes \_\_\_ No ☒

11 b. Income from stocks, bonds,  
 12 or royalties?

Yes \_\_\_ No ☒

13 c. Rent payments?

Yes \_\_\_ No ☒

14 d. Pensions, annuities, or  
 15 life insurance payments?

Yes \_\_\_ No ☒

16 e. Federal or State welfare payments,  
 17 Social Security or other govern-  
 18 ment source?

Yes \_\_\_ No ☒

19 If the answer is "yes" to any of the above, describe each source of money and state the amount  
 20 received from each.

21 NO monies received from  
 22 any sources

23 3. Are you married?

Yes \_\_\_ No ☒

24 Spouse's Full Name: N/A

25 Spouse's Place of Employment: N/A

26 Spouse's Monthly Salary, Wages or Income:

27 Gross \$ 0.00 Net \$ 0.00

28 4. a. List amount you contribute to your spouse's support: \$ 0.00

- b. List the persons other than your spouse who are dependent upon you for support and indicate how much you contribute toward their support. (NOTE: For minor children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.)

NO Dependents at this time

5. Do you own or are you buying a home? Yes \_\_\_ No ☒

Estimated Market Value: \$ 0.00 Amount of Mortgage: \$ 0.00

6. Do you own an automobile? Yes \_\_\_ No ☒

Make N/A Year N/A Model N/A

Is it financed? Yes \_\_\_ No ☒ If so, Total due: \$ 0.00

Monthly Payment: \$ 0.00

7. Do you have a bank account? Yes \_\_\_ No ☒ (Do not include account numbers.)

Name(s) and address(es) of bank: NO Bank Account at this time

Present balance(s): \$ 0.00

Do you own any cash? Yes \_\_\_ No ☒ Amount: \$ 0.00

Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes \_\_\_ No ☒

NO other assets at this time

8. What are your monthly expenses?

Rent: \$ 0.00 Utilities: 0.00

Food: \$ 0.00 Clothing: 0.00

Charge Accounts:

Name of Account	Monthly Payment	Total Owed on This Acct.
<u>N/A</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
<u>N/A</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
<u>N/A</u>	\$ <u>0.00</u>	\$ <u>0.00</u>

1 9. Do you have any other debts? (List current obligations, indicating amounts and to  
 2 whom they are payable. Do not include account numbers.)

3 NO other Debts at this time

4  
 5 10. Does the complaint which you are seeking to file raise claims that have been presented  
 6 in other lawsuits? Yes ☐ No ☒

7 Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in  
 8 which they were filed.

9 N/A

10  
 11 I consent to prison officials withdrawing from my trust account and paying to the court  
 12 the initial partial filing fee and all installment payments required by the court.

13 I declare under the penalty of perjury that the foregoing is true and correct and  
 14 understand that a false statement herein may result in the dismissal of my claims.

15  
 16 July 31, 2008

17 DATE

18 Joshua Woodridge

19 SIGNATURE OF APPLICANT



CALIFORNIA DEPARTMENT OF CORRECTIONS  
CALIFORNIA CORRECTIONAL CENTER  
INMATE TRUST ACCOUNTING SYSTEM  
INMATE TRUST ACCOUNT STATEMENTS

FOR THE PERIOD: JAN. 28, 2008 THRU JUL. 28, 2008

ACCOUNT NUMBER : P33283

BED/CELL NUMBER: L600000000001361

ACCOUNT NAME : WOOLRIDGE, JOSHUA

ACCOUNT TYPE: I

PRIVILEGE GROUP: D

TRUST ACCOUNT ACTIVITY

TRAN

DATE	CODE	DESCRIPTION	COMMENT	CHECK NUM	DEPOSITS	WITHDRAWALS	BALANCE
01/28/2008		BEGINNING BALANCE					0.00
03/10/2008	0030	CASH DEPOSIT 46876			22.50		22.50
03/12/2008	W512	LEGAL POSTAGE 3630 LCLMA				2.76	19.74
03/12/2008	W516	LEGAL COPY CH 3631 LCLCO				3.00	16.74
03/12/2008	W516	LEGAL COPY CH 3631 LCLCO				5.00	11.74
03/13/2008	W512	LEGAL POSTAGE 3684 LCLMA				3.88	7.86
* 03/13/2008	W216	FED. FILING F FELIMPLEES				4.50	3.36
03/13/2008	0030	CASH DEPOSIT 46892			33.75		37.11
03/17/2008	FC02	DRAW-FAC 2 CUS2HUBBAM				27.90	9.21
* 03/17/2008	W216	FED. FILING F FELIMPLEES				6.75	2.46
03/19/2008	FR01	CANTEEN RETUR 703776				27.90	30.36
* 03/19/2008	W220	STATE FILING FELIMPLEES				11.25	19.11
03/19/2008	FC02	DRAW-FAC 2 CUS2HUBBAM				16.65	2.46
03/27/2008	W512	LEGAL POSTAGE 3901 LCLMA				2.05	0.41
04/02/2008	W512	LEGAL POSTAGE 3969 LCLMA				0.41	0.00

CURRENT HOLDS IN EFFECT

DATE PLACED	HOLD CODE	DESCRIPTION	COMMENT	HOLD AMOUNT
06/27/2008	H107	POSTAGE HOLD	5317 POST	2.85
06/27/2008	H107	POSTAGE HOLD	5317 POST	0.76
07/01/2008	H107	POSTAGE HOLD	0004 POSTA	2.85
07/01/2008	H107	POSTAGE HOLD	0004 POSTA	0.76
07/01/2008	H109	LEGAL POSTAGE HOLD	0006 LCLMA	5.03
07/09/2008	H109	LEGAL POSTAGE HOLD	0110 LCLMA	8.03
07/10/2008	H109	LEGAL POSTAGE HOLD	0145 LCLMA	2.44
07/10/2008	H109	LEGAL POSTAGE HOLD	0145 LCLMA	0.42
07/15/2008	H109	LEGAL POSTAGE HOLD	0226 LCLMA	0.42
07/15/2008	H109	LEGAL POSTAGE HOLD	0226 LCLMA	3.78
07/15/2008	H109	LEGAL POSTAGE HOLD	0226 LCLMA	1.51
07/17/2008	H109	LEGAL POSTAGE HOLD	0269 LCLMA	5.03
07/18/2008	H109	LEGAL POSTAGE HOLD	0883 LCLMA	1.17
07/18/2008	H109	LEGAL POSTAGE HOLD	0883 LCLMA	1.51
07/22/2008	H109	LEGAL POSTAGE HOLD	0318 LCLMA	12.47

CALIFORNIA CORRECTIONAL CENTER  
INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: JAN. 28, 2008 THRU JUL. 22, 2008

ACCT: P33223 ACCT NAME: MURKIDGE, JOSEPH ACCT TYPE: 1

\* RESTITUTION ACCOUNT ACTIVITY

DATE SENTENCED: 03/12/99  
COUNTY CODE: RIU

CASE NUMBER: RIF078187  
FINE AMOUNT: \$ 1,600.00

DATE	TRANS.	DESCRIPTION	TRANS. AMT.	BALANCE
01/28/2008		BEGINNING BALANCE		432.47
03/06/08	SU03	SYS UPDATE - POS	3.12-	429.35
03/10/08	DR30	REST DED CASH DEPOSIT	25.00-	404.35
03/13/08	DR30	REST DED CASH DEPOSIT	37.50-	366.85

\* THIS STATEMENT DOES NOT REFLECT THE ADMINISTRATIVE FEE CHARGE THAT \*  
\* IS EQUAL TO TEN PERCENT OF THE RESTITUTION AMOUNT COLLECTED \*

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
0.00	56.25	56.25	0.00	49.03	0.00

CURRENT  
AVAILABLE  
BALANCE  
49.03-

Petitioner, Joshua Woolridge P-33283  
California Correctional Center  
711-045 Center Road  
Lassen Unit Facility/ L4-136 low  
Post Office Box 2210  
Susanville, California 96127-2210



RECEIVED

AUG 6 2008

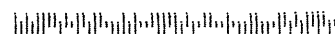
RICHARD M. WIEKING  
CLERK, U.S. DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

United States District Court  
Northern District of California  
Clerk, U. S. District Court  
ATTN: Clerk of the Court For Filing  
450 Golden Gate Avenue  
Post Office Box 36060  
San Francisco, California

STATE PRISON

94102-9680

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